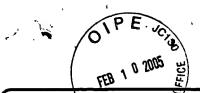
TRANSMITTAL FORM		Application No.	 	09/835,979	
	(to be used for all correspondence after initial filing)		Filing Date First Named Inventor	<u> </u>	16, 2001
•	•	0.	Art Unit	Michael McClary 2661	
			Examiner Name	<u> </u>	en Brian D
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	SIGNATURE	OF APPLICA	NT, ATTORNEY, OR A	SENT	* ** ***
Firm	Raj V. Abhyank	er, Reg. No. 4	15,474		
<i>or</i> Individual name	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP				
Signature	DEARLET, SOROLOTT, TATLOR & ZAT MAIN LLI				
Date	2/8/05				
	CERTIFI	CATE OF MAIL	ING/TRANSMISSION		
I hereby certify that this sufficient postage as fi 22313-1450.	s correspondence is be	ing deposited wit	h the United States Postal	Service nts, P.O.	on the date shown below wi Box 1450, Alexandria, VA
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Based on PTO/SB/21 (04-04) as modified by Blakely, Solokoff, Taylor & Zafman (wtr) 06/04/2004. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



Application Number 09/835,979 Filing Date April 16, 2001 Patent fees are subject to annual revision First Named Inventor Michael McClary Nguyen, Brian D. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27. Art Unit 2661 **TOTAL AMOUNT OF PAYMENT** 0.004906P076 Attorney Docket No. METHOD OF PAYMENT (check all that apply) ☐ Check ☐ Credit card ☐ Money Order ☒ None Other (please identify): Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee ☐ Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) ☑ Credit any overpayments under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. **FEE CALCULATION EXTRA CLAIM FEES** Extra Fee from below Fee Paid Claims Total Claims 5₫* 0 50.00 \$0.00 Independent Claims 11 0 200.00 \$0.00 Multiple Dependent Large Entity Small Entity Fee Fee Fee Fee Description Code Code (\$) (\$) 1202 50 2202 25 Claims in excess of 20 1201 200 2201 100 Independent claims in excess of 3 360 180 Multiple Dependent claim, if not paid 2203 *Reissue independent claims over original patent 1204 300 2204 150 **or number previously paid, if greater, For Reissues, see below **Reissue claims in excess of 20 and over original patent 150 1205 300 2205 SUBTOTAL (1) (\$) 0.00 **ADDITIONAL FEES** Large Entity **Small Entity** Code (\$) Code (\$) Fee Description Fee Paid 1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet. 2053 130 2053 130 Non-English specification 1251 120 2251 60 Extension for reply within first month 1252 450 2252 225 Extension for reply within second month Extension for reply within third month 1253 1,020 2253 510 Extension for reply within fourth month 1254 2254 1,590 795 Extension for reply within fifth month 1255 2,160 2255 1,080 1401 2401 500 250 Notice of Appeal 1402 Filing a brief in support of an appeal 500 2402 250 1403 1,000 2403 500 Request for oral hearing 1451 1,510 2451 1,510 Petition to institute a public use proceeding 1460 130 2460 130 Petitions to the Commissioner Processing fee under 37 CFR 1.17(q) 1807 50 1807 50 1806 Submission of Information Disclosure Stmt 180 1806 180 Filing a submission after final rejection (37 CFR § 1.129(a)) 1809 790 1809 395 1810 395 For each additional invention to be examined (37 CFR § 1.129(b)) Other fee (specify) SUBTOTAL (2) (\$)

Complete if Known

SUBMITTED BY Complete (if applicable)					
Name (Print/Type)	Raj V. Abhyanker	Registration No. (Attorney/Agent)	45,474	Telephone	(408) 720-8300
Signature	8UM			Date	218/05



AMENDMENT UNDER 37 C.F.R. §1.116 **EXPEDITED PROCEDURE EXAMINING GROUP 2661**

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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09/835,979

Confirmation No.

First Named Inventor

Michael McClary

Filed

April 16, 2001

TC/A.U.

METHOD AND APPARATUS FOR SIMULTANEOUSLY SYNC HUNTING

SIGNALS

Examiner

Nguyen, Brian D.

Docket No.

04906.P076

Customer No.

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

RESPONSE

Sir:

Responsive to the Office Action mailed on November 9, 2004, Applicant respectfully requests the Examiner to enter the following amendment and to consider the following remarks:

	envelope addressed to the	Commissioner for	ed States Postal Service as first class mai Patents, PO Box 1450, Alexandria,
	Date of Do	eposit	
Deborah A. McGo	vern		
Name of	Person Mailing Correspond	ndence	01
NUCYE	ulla	Febru	1ani X. 2005
Signature	2	Date	

Attorney's Docket Number: 004906.P076 Application Number: 09/835,979

Patent Application Art Unit: 2661